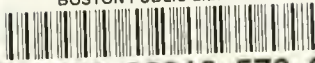
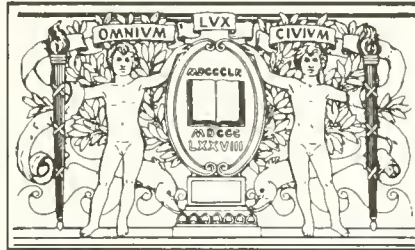


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HOMEOWNERSHIP OPPORTUNITY PROGRAM

INITIAL APPLICATION

FALL 1988 FUNDING COMPETITION

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DUE NO LATER THAN:

TUESDAY, DECEMBER 6, 1988

5:00 P.M.

SECTION A: FILING INSTRUCTIONS

HOMEOWNERSHIP OPPORTUNITY PROGRAM

INITIAL APPLICATION PACKAGE

FALL 1988 FUNDING COMPETITION: FILING INSTRUCTIONS

Seven full sets of the HOP initial application must be submitted **no later than 5:00 p.m. on Tuesday, December 6,** to the:

Homeownership Opportunity Program
Massachusetts Housing Partnership
c/o Executive Office of Communities and Development
100 Cambridge Street, 14th Floor
Boston, MA 02202

HOP initial applications received at the Massachusetts Housing Partnership after 5:00 p.m. on Tuesday, December 6, 1988, **will not be accepted** for consideration during the funding competition.

In addition, one full set of the application package must be submitted by December 6 to the chief elected official of the community in which the project will be located. You may wish to request a receipt for the application provided to the community.

A check for the HOP initial application fee, made out to the Massachusetts Housing Finance Agency, must be submitted with the application package. The fee is \$3 per every \$1,000 of MHFA mortgage financing requested, up to a maximum fee of \$3,000. (The maximum fee for non-profit sponsors is \$500.)

Please refer to the September 1988 guidelines as you prepare this initial application for funding.

Use the following standards for packaging applications:

- o Use 8-1/2" x 11" paper. Do not submit 8-1/2" x 14" documents unless they are included in this application package.
- o Use dividers with clearly marked tabs to separate sections of the application.
- o Mark one of the seven application sets as the set containing all required original signatures and the application fee.
- o Bind each application at the top, using a two-hole center punch.
- o Fold architectural plans and submit three full sets with the application package. **Please do not roll plans.**
- o Enclose required exhibits in the appropriate sections. If you wish to submit information not requested in the application, submit it as a separate section of your proposal and clearly identify it as additional information.

Note: Sponsors of HOP initial applications selected for funding will be invited to submit HOP mortgage applications to the Massachusetts Housing Financing Agency. A list of the documents required in the mortgage application is available at MHFA.

SECTION B: APPLICATION SUMMARY SHEET

B. APPLICATION SUMMARY SHEET

I. Project Identification

Project Name: _____

Site Address:

(Street) _____

(Community) _____

(Zip Code) _____

Developer: _____

Contractor: _____

II. Application Type (Check one box only):

Community-supported _____ Developer-only _____

(A community-supported application must contain sign-offs and support letters from the chief elected official and the chairman of the local housing partnership (if one exists). If an application does not contain these sign-offs and support letters, it is a "developer-only" application.)

III. Number/Percentage of Units

	<u>Number</u>	<u>Percentage of Total Units</u>
Public Housing Units (Ch. 705/Ch. 689)	_____	_____
HOP-assisted units	_____	_____
MHFA-assisted units *	_____	_____
Market units	_____	_____

Total number of units _____

(* MHFA-assisted units are not included in every application)

IV. Number/Percentage of Three-Bedroom Affordable Units

	<u>Number</u>	<u>Percentage of Total Units</u>
Three-bedroom public housing units:	_____	_____
Three-bedroom HOP-assisted units:	_____	_____

V. Comprehensive Permit Information

o Will this project require a comprehensive permit?

Yes _____ No _____

o Has the comprehensive permit been granted?

Yes _____ No _____

o What is the density of the project in units per acre? _____

VI. Requested Financing:

Total MHFA Funds: \$ _____

Total HOP Funds: \$ _____

SECTION C: THE COMMUNITY

C. THE COMMUNITY

I. Community Information

Chief Elected Official (Name) _____

(Title) _____

(Address) _____

(City/Town) _____ (ZIP) _____

(Telephone) _____

Local Housing Partnership (Chair) _____
(If any) _____
(Address) _____
(City/Town) _____ (ZIP) _____
(Telephone) _____

City/Town Planner (Name) _____
(If any) _____
(Address) _____
(City/Town) _____ (ZIP) _____
(Telephone) _____

Community Contact Person (Name) _____
for this Project
(Address) _____
(City/Town) _____ (ZIP) _____
(Telephone) _____

Comprehensive Permit Projects Only:

Chairman, Zoning Board of Appeals (Name) _____
(Address) _____
(City/Town) _____ (ZIP) _____
(Telephone) _____

II. Local Contributions

A. Which of the following contributions has the community made to the project? Please check:

- ☐ Land Donation _____
- ☐ Building Donation _____
- ☐ Marketing Assistance _____
- ☐ Other Work of Local Staff _____
- ☐ Comprehensive Permit Granted _____
- ☐ Density Increase _____
- ☐ Waiver of Permit Fees _____
- ☐ Local Funds (Cash) _____
- ☐ Amount \$ _____

B. Has the community contributed to the project in ways other than those listed above? If so, please indicate:

III. Local Approvals -- **COMMUNITY-SUPPORTED APPLICATIONS ONLY**

If this application is **community-supported**, please complete this section. (By HOP definition, a community-supported application is supported both by the chief elected official and by the local housing partnership -- if one exists.)

A. Letters of Support

- ☐ Enclose a letter of support for your project from the chief elected official.
- ☐ Enclose a letter of support for your project from the local housing partnership (if one exists).

B. Signatures of Support

Provide the signatures requested below:

Chief Elected Official

Local Housing Partnership

Date

Date

SECTION D: THE PROJECT

D. THE PROJECT

I. Project Information

A. Development Type (Check):

- ☐ Single Family (Detached) _____
- ☐ Single Family
(Attached - Fee Simple) _____
- ☐ Condominiums _____
- ☐ Cooperatives _____
- ☐ Other _____

B. Project Style (Check):

- ☐ Single Family Detached _____
- ☐ Townhouse _____
- ☐ Low-Rise
(less than 35 feet) _____
- ☐ Mid-Rise (30 - 75 feet) _____
- ☐ Other (Specify) _____

C. Construction Type (Check):

- ☐ New Construction _____
- ☐ Rehabilitation _____
- ☐ Stick-built _____
- ☐ Modular/Manufactured _____

Name of Manufacturer Co. _____

Address _____

City/Town _____

Contact Person _____

Phone Number _____

Registration Number _____

D. Unit Summary

	Number _____	Percentage of Total Units _____
Public Housing Authority Units	_____	_____
HOP-assisted Units	_____	_____
MHFA-financed Units *	_____	_____
Market Units	_____	_____
Total Units	_____	_____

E. Unit Composition Complete the chart below. Include a separate entry for each unit type according to its square footage and/or sales price. Example: The project will contain three HOP units, each with 1200 square feet. One HOP unit will sell for \$75,000; one for \$85,000; and one for \$95,000. Prepare **three separate entries** for the three HOP units.

TYPE OF UNIT	# OF UNITS	# OF BEDROOMS	# OF BATHS	LIVEABLE SQ. FOOTAGE	SALES PRICES
PUBLIC HOUSING					
HOP - ASSISTED					
MHFA * FINANCED					
MARKET UNITS					

* Many applications will contain no MHFA-financed units. An MHFA-financed unit is different from a HOP-assisted unit in sales price limits, household income limits, and mortgage interest rates.

F. Unit Totals by Bedrooms:

Total number of 2 bedroom units: _____
Total number of 3 bedroom units: _____
Total number of 4 bedroom units: _____

II. Public Housing Units

Attach a letter from the local housing authority indicating interest in purchasing at least 5% of the HOP-assisted units. If you cannot provide such a letter, explain why:

III. Commercial Space

Will any commercial space be developed as part of this project?

Yes _____ No _____

If "yes", please provide the following information:

- o Number of commercial units: _____
- o Total square footage devoted to commercial use: _____
- o Percentage of total project square footage for commercial use: _____

If "yes", what type of commercial business use is proposed?

IV. Amenities

Indicate any special amenities to be included in your project (Check):

Covered Parking	_____	Dishwasher	_____
Garages for all Units	_____	Disposal	_____
Swimming Pool	_____	Individual Washer/Dryer	_____
Tennis Court	_____	Laundry Room	_____
Clubhouse	_____	Exercise Equipment	_____
Whirlpool	_____	Racquetball/Squash Courts	_____
Cable T.V.	_____	T.V. Security	_____
Sauna/Steam Room	_____	Day Care	_____
Other (Specify)	_____		

Will all amenities be available to HOF buyers as well as market buyers?

Yes _____ No _____

If "no", explain the difference in the amenity packages:

V. Condominium Association Fees

o List the costs and services to be included in the condominium fee:

o Will the condominium fee include any developer subsidy?

Yes _____ No _____

If "yes", describe the amount, duration, and focus of the subsidy:

VI. Development Schedule

Complete the chart below by providing the appropriate month and year. If you plan to develop the project in one phase, complete only the first vertical column. If you plan to develop in two and/or three phases, complete the second and/or third columns as well.

	<u>Phase 1</u>	<u>Phase 2</u>	<u>Phase 3</u>
o Number of Units	_____	_____	_____
o All Permits Granted	_____	_____	_____
o Construction Start	_____	_____	_____
o 50% Complete	_____	_____	_____
o Marketing Start	_____	_____	_____
o 100% Complete	_____	_____	_____
o Initial Occupancy	_____	_____	_____

VII. Subsidies in Addition to HOP Financing

A. Community Development Action Grant (CDAG) Funds

If you are seeking CDAG funds in support of the project, the community in which the project will be located must submit five full sets of the CDAG application with this HOP initial application. In addition, please provide the following information:

o amount of CDAG to be requested \$ _____

o amount of CDAG per affordable unit \$ _____
("affordable" is defined as HOP-
assisted and public housing units)

o proposed use of CDAG funds (check):

Streets/sidewalks _____
Water/sewer _____
Drainage _____
Other (specify) _____

B. Other Public Funds

If you are seeking other public funds in support of your project, provide the following information:

o Funding source: _____

o Amount needed: _____

o Status of Funding Application: _____

SECTION E: THE SITE

E. THE SITE

I. Site Address

Street: _____

Community: _____

Zip Code: _____

II. Site Characteristics

A. Summary description:

B. Total number of acres:

C. Total number of buildable acres:

D. Presence of development constraints:

(Describe any features of the site -- wetlands; unusual slope;
railroad tracks; power lines; location in a historic district;
hazardous waste; etc. -- that may affect development.)

III. Zoning

A. Current zoning:

Zoning classification: _____

Usage allowed: _____

Units per acre allowed: _____

